



Short Term Disability Insurance

Benefit Highlights

The State of Minnesota

What is short term disability insurance?	<p>Short term disability insurance pays you a portion of your salary if you cannot work because of a disabling illness, injury, or pregnancy.</p> <p>This highlight sheet is an overview of your short term disability insurance. A certificate of Insurance that explains your coverage in detail is available on the Minnesota Management & Budget/SEGIS website.</p>
What is disability?	<p>Disability is defined in The Hartford's contract with the State of Minnesota. You must be Totally Disabled for benefits to begin. Total Disability means you are prevented from performing the essential duties of your occupation due to accidental bodily injury, sickness, mental illness, substance abuse, or pregnancy.</p> <p>If you receive benefits for Total Disability and then go back to work on a part-time or limited basis, you may qualify for a Partial Disability benefit. Partial Disability means that you are able to perform some but not all of the essential duties of your or any occupation and as a result you are earning more than 20% but not more than 80% of your regular pre-disability weekly earnings.</p>
Am I eligible?	You are eligible if you are an active employee who is eligible for the insurance as determined by the State of Minnesota. This includes elected and appointed public officials but excludes employees who are eligible for coverage under the Manager's Income Protection Plan.
How much coverage would I have?	<p>The State of Minnesota's plan allows employees to choose their coverage amount in increments of \$100. The minimum benefit amount you can enroll for is \$300 per month and the maximum cannot exceed 66.67% of your gross monthly salary. See the following chart to determine your maximum monthly benefit level.</p> <p>The plan maximum is \$5,000 per month.</p> <p>Please contact your Human Resources department for more information.</p>
When can I enroll?	You must enroll in the plan within 35 days of your first day of employment, reinstatement, or re-hire. Your coverage will take effect on the 36th day of employment. Employees who become insurance eligible must enroll within 30 days of becoming eligible. If you do not enroll during these time frames, you will be required to provide evidence of good health.
When is it effective?	Your coverage effective date is subject to the terms and conditions of the policy. In no case will a new employee's elected benefits become effective sooner than 35 days of active employment. You must be Actively at Work on the day your coverage takes effect.

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Employee's Monthly Salary	Maximum Monthly Benefit	Semi-monthly Cost*	Monthly Cost
\$450	\$300	\$1.86	\$3.72
\$600	\$400	\$2.48	\$4.96
\$750	\$500	\$3.10	\$6.20
\$900	\$600	\$3.72	\$7.44
\$1,050	\$700	\$4.34	\$8.68
\$1,200	\$800	\$4.96	\$9.92
\$1,350	\$900	\$5.58	\$11.16
\$1,500	\$1,000	\$6.20	\$12.40
\$1,650	\$1,100	\$6.82	\$13.64
\$1,800	\$1,200	\$7.44	\$14.88
\$1,950	\$1,300	\$8.06	\$16.12
\$2,100	\$1,400	\$8.68	\$17.36
\$2,250	\$1,500	\$9.30	\$18.60
\$2,400	\$1,600	\$9.92	\$19.84
\$2,550	\$1,700	\$10.54	\$21.08
\$2,700	\$1,800	\$11.16	\$22.32
\$2,850	\$1,900	\$11.78	\$23.56
\$3,000	\$2,000	\$12.40	\$24.80
\$3,150	\$2,100	\$13.02	\$26.04
\$3,300	\$2,200	\$13.64	\$27.28
\$3,450	\$2,300	\$14.26	\$28.52
\$3,600	\$2,400	\$14.88	\$29.76
\$3,750	\$2,500	\$15.50	\$31.00
\$3,900	\$2,600	\$16.12	\$32.24
\$4,050	\$2,700	\$16.74	\$33.48
\$4,200	\$2,800	\$17.36	\$34.72
\$4,350	\$2,900	\$17.98	\$35.96
\$4,500	\$3,000	\$18.60	\$37.20
\$4,650	\$3,100	\$19.22	\$38.44
\$4,800	\$3,200	\$19.84	\$39.68
\$4,950	\$3,300	\$20.46	\$40.92
\$5,100	\$3,400	\$21.08	\$42.16
\$5,250	\$3,500	\$21.70	\$43.40
\$5,400	\$3,600	\$22.32	\$44.64
\$5,550	\$3,700	\$22.94	\$45.88
\$5,700	\$3,800	\$23.56	\$47.12
\$5,850	\$3,900	\$24.18	\$48.36
\$6,000	\$4,000	\$24.80	\$49.60
\$6,150	\$4,100	\$25.42	\$50.84
\$6,300	\$4,200	\$26.04	\$52.08
\$6,450	\$4,300	\$26.66	\$53.32
\$6,600	\$4,400	\$27.28	\$54.56
\$6,750	\$4,500	\$27.90	\$55.80
\$6,900	\$4,600	\$28.52	\$57.04
\$7,050	\$4,700	\$29.14	\$58.28
\$7,200	\$4,800	\$29.76	\$59.52
\$7,350	\$4,900	\$30.38	\$60.76
\$7,500	\$5,000	\$31.00	\$62.00

Important Details

A certificate of Insurance that explains your coverage in detail is available on the Minnesota Management & Budget/SEGIP website.

Exclusions:

You cannot receive short term disability insurance benefit payments for disabilities that are caused or contributed to by:

- war or act of war (declared or not)
- the commission of, or attempt to commit a felony
- an intentionally self-inflicted injury
- any case where your being engaged in an illegal occupation was a contributing cause to your disability
- sickness or injury for which workers' compensation benefits are paid, or may be paid, if duly claimed
- any injury sustained as a result of doing any work for pay or profit for another employer

You must be under the regular care of a physician to receive benefits.

This benefit highlights sheet is an overview of the short term disability insurance being offered and is provided for illustrative purposes only and is not a contract. It in no way changes or affects the policy as actually issued. Only the insurance policy issued to the policyholder (your employer) can fully describe all of the provisions, terms, conditions, limitations and exclusions of your insurance coverage. In the event of any difference between the benefit highlights sheet and the insurance policy, the terms of the insurance policy apply.